

**DEPARTMENT of HUMAN RESOURCES & ORGANIZATIONAL DEVELOPMENT**

Edward G. Williams, Ph.D., Director

**1522 Texas Parkway****Missouri City, TX 77489****(281) 403-8500****[egwilliams@missouricitytx.gov](mailto:egwilliams@missouricitytx.gov)**

Dear Firefighter Applicant:

Thank you for your interest in becoming a member of the Missouri City Fire and Rescue Services. To determine your eligibility, which is the next step in our application process, you must submit the following information to the Human Resources & Organizational Development Department (HR/OD) before the established and published deadlines listed on the job announcement for this position. For your convenience we are listing all necessary application documents.

- ☐ Completed City of Missouri City Application for Employment
- ☐ Completed Firefighter Application Addendum
- ☐ Proof Of **Current** Fire Certification (*One of the Following*)
  - ☐ Copy of Texas Commission on Fire Protection Certification or
  - ☐ Copy of Texas Commission on Fire Protection Grade Letter Sheet or
  - ☐ Copy of Firefighter I & Firefighter II IFSAC Seals.
- ☐ Proof Of **Current** Emergency Medical Services Certification (*One of the Following*)
  - ☐ Copy of the Texas Department of State Health Services EMT-Basic, EMT-Intermediate, EMT-Paramedic, or Licensed-Paramedic Certification
  - ☐ Copy of the National Registry EMT-Basic, EMT- Intermediate, or EMT-Paramedic Certification
  - ☐ Copy of the National Registry Grade Sheet Letter.
- ☐ Completed and Signed, Application Letter (Below).

Submitting copies of any documents not listed above may significantly delay the review of your application, and may render your application invalid thereby disqualifying your application.

If you meet the above, the HR/OD Department will request additional information as the process continues. We look forward to reviewing the materials requested above and wish you continued success in your career.

Sincerely,

Department of Human Resources and Organizational Development



**APPLICATION FOR EMPLOYMENT**  
**CITY OF MISSOURI CITY**  
1522 Texas Parkway, Missouri City, TX 77489  
Phone: 281-403-8500  
Fax: 281-261-4233  
E-mail: [apply@ci.mocity.tx.us](mailto:apply@ci.mocity.tx.us)

### INSTRUCTIONS:

Type or print your answers to all questions listed on the application. The City of Missouri City requires that all individuals interested in employment complete an official application, and will accept a professional resume as a supplement to the application form. Applicant must attach copies of all supporting documentation to the official application.

### SECTION I: PERSONAL INFORMATION

Position for which you are applying (one per application):

Firefighter / EMT

Date:

Please tell us how did you find out about this position?

☐ City's website ☐ Monster ☐ Yahoojobs.com ☐ City Employee ☐ Other

Please complete (check one preferred method of contact):

☐ Cell Phone ☐ Home Phone ☐ Work Phone ☐ E-mail Address

Name (First) (Middle) (Last)

Street Address Apt./Suite  
City State Zip Code

Have you ever worked for City of Missouri City?

☐ Yes ☐ No

When \_\_\_/\_\_\_/\_\_\_ to When \_\_\_/\_\_\_/\_\_\_

Are you legally authorized to work in the United States? ☐ Yes ☐ No

Can you provide evidence of your eligibility to work? ☐ Yes ☐ No

Dept/Division

Do you have relatives employed by City of Missouri City? ☐ Yes ☐ No Department

Their Name(s) Relationship(s)

Do you have a valid Texas Driver's License? ☐ Yes ☐ No

The City of Missouri City may verify all information, including moving violations.

High School/  
GED

Do you have a High School Diploma or GED Certificate? ☐ Yes ☐ No

Prior to an interview, the City may require official copies of college or university transcripts or High School/GED certificate or Diploma, or professional certificates.

College or University	Name	Location	Dates (To and From)	Credit Hours Earned
	Major	Minor	Type Degree	Date Graduated
College or University	Name	Location	Dates (To and From)	Credit Hours Earned
	Major	Minor	Type Degree	Date Graduated
College or University	Name	Location	Dates (To and From)	Credit Hours Earned
	Major	Minor	Type Degree	Date Graduated

List all applicable certificates or licenses.

## SECTION II: EMPLOYMENT RECORD

Beginning with current or most recent dates, provide a comprehensive description of your professional experience. If you require additional space attach an additional sheet to this document.

Current or Most Recent Employer \_\_\_\_\_  
Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_ Total time employed: \_\_\_\_\_  
Address \_\_\_\_\_ City/State \_\_\_\_\_ Phone \_\_\_\_\_  
Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

Previous Employer \_\_\_\_\_  
Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_ Total time employed: \_\_\_\_\_  
Address \_\_\_\_\_ City/State \_\_\_\_\_ Phone \_\_\_\_\_  
Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

Previous Employer \_\_\_\_\_  
Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_ Total time employed: \_\_\_\_\_  
Address \_\_\_\_\_ City/State \_\_\_\_\_ Phone \_\_\_\_\_  
Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

Previous Employer \_\_\_\_\_  
Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_ Total time employed: \_\_\_\_\_  
Address \_\_\_\_\_ City/State \_\_\_\_\_ Phone \_\_\_\_\_  
Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

Have you ever been convicted, plead guilty or no contest, or placed on deferred adjudication or probation for any offense other than traffic violations? Yes ☐ No ☐

Provide details (charges, penalties, where, when, and disposition)

By signing below, I certify, authorize, or acknowledge:

That all of the information provided by me on this application for employment and any attachments or supporting documents I submit are accurate. Recognizing that the City may rely upon information I provide to make an employment decision, I hereby certify that all information herein presented is accurate and free from intentional omission, falsification, or misleading information.

I authorize the City of Missouri City to conduct background, personal, criminal, employment history, or any type of investigation it may require to determine of my fitness for the position for which I have applied. Additionally, I understand that the City may require a physical, mental, or drug pre-employment screening after the City has made me a conditional offer for employment.

\_\_\_\_\_

Usual Signature of Applicant

\_\_\_\_\_

Printed Name of Applicant

\_\_\_\_\_

Date

# City of Missouri City

## Firefighter Application – Addendum

**Name** \_\_\_\_\_ **DOB** \_\_\_\_\_ **Date** \_\_\_\_\_  
 (Last, first, middle) dd/mm/year dd/mm/year

The Missouri City Fire Department (MCFD) requires that all applicants answer the following questions. Your responses will provide the MCFD with essential information to determine your eligibility and overall qualifications to become a firefighter. Please print or type your responses in black or blue ink. Answer all questions accurately and completely. You must respond to ALL questions. If the options presented as responses do not apply to your particular situation, simply write N/A next to the question.

**Circle one ONLY**

1. Do you have a high school diploma or GED?	Yes No
2. Have you ever been convicted of any felony offense? (A conviction includes probation, community supervision, or deferred adjudication for purposes of this application.)	Yes No
3. Have you ever been convicted of a misdemeanor offense, other than a traffic charge? (A conviction includes probation, community supervision, or deferred adjudication for purposes of this application.)	Yes No
4. Have you ever used any illegal drugs?	Yes No
4a. If yes, at what age was your last use of any illegal drug(s)?	_____
5. Have you ever been convicted of a family violence offense?	Yes No
6. Have you ever used marijuana?	Yes No
6a. If yes, how long ago ____ years ____ months ____ days.	_____
6b. If yes to #6, how many times total have you used marijuana?	_____
7. Have you ever used any "hallucinogenic" drug such as ecstasy, LSD, PCP, or other type of hallucinogen?	Yes No
7a. If yes, in what year did you last use one of the hallucinogens?	_____
7b. If yes to #7, how many times did you use a hallucinogen?	_____
8. Have you ever been in the military?	Yes No
8a. Have you ever been discharged from the military?	Yes No
8b. If yes to #8a, did you receive an honorable discharge?	Yes No N/A

9. Have you ever illegally used drug such as cocaine, heroin, speed, illegal steroids, downers etc.?	Yes    No
9a. If yes, how long ago ____ years ____ months ____ days.	_____
9b. If yes to #9, how many times?	_____
10. Have you received ticket(s) for a "moving" traffic violation in the past 12 months, e.g. speeding, ran red light, ran stop sign etc.?	Yes    No
10a. If yes, how many have you received in the past 12 months?	_____
11. Have you ever sold, or possessed a controlled substance, with intent to deliver?	Yes    No
12. Do you have a brother, sister, parent, step-parent, grandparent, aunt, uncle, niece, nephew, grandson, granddaughter, mother-in-law, father-in-law, or significant other currently working at the Missouri City Fire Department?	Yes    No

**Authority to Release Information:** By signing below, I affirm, agree, and understand that all statements on this form are true and accurate. I further understand that any misrepresentation, falsification, or material omission of information or data on this application for employment may result in exclusion from further consideration or, if hired, may result in termination of employment. Furthermore, I authorize the City of Missouri City, TX to verify all information I have submitted on this application for employment. I also give consent to the release of information to authorized officers, agents, and/or employees of the City of Missouri City, which may include but not be limited to information concerning my past and present work; including my official personnel files; attendance records; evaluations; educational records including transcripts; military service; law enforcement records; and/or any personnel record deemed necessary. In addition, I authorize appropriate officers, agents, and/or employees of the City of Missouri City, Texas, to inquire of third parties such as credit bureaus, educational entities, present and past employers, fire service organizations. I also absolve the City of Missouri City and all third parties from any and all claims of any nature that I may have now or in the future as a result of any inquiry or response given to such inquiries made in connection with my application for employment.

Signature\_\_\_\_\_

Date\_\_\_\_\_

# **Application Letter**

---

Date

City of Missouri City  
ATT: Human Resources & Organizational Development  
1522 Texas Parkway  
Missouri City, TX 77489

Dear Sir or Ms:

As you requested, please find my application, addendum and supporting documentations for your review, then determine if I meet the qualifications you have established to become a Missouri City Firefighter. To ensure that I submit all required information, I have completed the checklist you provided below. Please note that I have read and I am submitting only the information you requested.

- ☐ Completed and signed, Application Letter (This Letter);
- ☐ Completed and signed City of Missouri City Application for Employment;
- ☐ Completed and signed Firefighter Application Addendum;

**One of the following**

- ☐ Certificate from the Texas Commission on Fire Protection
- ☐ Commission on Fire Protection Grade Letter Sheet
- ☐ Copy of Firefighter I and Firefighter II IFSAC Seals

**One of the following**

- ☐ Copy of Texas Department of Health EMT-I Certification;
- ☐ Copy of Texas Department of Health Paramedic Certification;
- ☐ Copy of Texas Department of Health EMT-B Certification
- ☐ Copy of the National Registry EMT-B, EMT- I, or EMT-P Certification
- ☐ Copy of the National Registry Grade Sheet Letter.

Thank you for your attention to his application and look forward to hearing from you.

Sincerely,

---